



... THE ...  
**ANNUAL REPORT**  
... ON ...  
**The Health,  
Sanitary Condition,  
ETC., ETC., OF THE  
COUNTY BOROUGH OF HASTINGS,  
FOR THE YEAR  
1915.**

BY  
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# COUNTY BOROUGH OF HASTINGS.

## STATISTICAL SUMMARY for 1915.

Area in Acres (including 373 acres of foreshore) ...	4,857
Population at Census, 1911 ... ..	61,145
„ Middle of 1915, estimated ... ..	52,053
Density of Population per Acre ... ..	11·6
Number of Inhabited Houses, Census, 1911 ...	11,284
Birth-rate, average 1910-1914 ... ..	14·9
„ in 1915 ... ..	15·5
Death-rate (Nett) average 1910-1914 ... ..	13·5
„ in 1915 ... ..	17·3
„ „ Corrected for age and sex ...	14·5
„ „ Zymotic (7 chief epidemic diseases) ... ..	0·86
„ Infantile, per 1,000 of Births—	
Average 1910-1914 ... ..	83
„ „ in 1915 ... ..	97
Rainfall, average ... ..	29·07 inches
„ in 1915 ... ..	32·10 inches
Bright Sunshine, average ... ..	1,783 hours
„ „ in 1915 ... ..	1,734 hours
Mean Temperature, average ... ..	49·8 degrees
„ „ in 1915 ... ..	49·7 degrees



*With the Medical Officer  
of Health's Compliments.*

*Health Department,  
Town Hall,  
Hastings.*



TO THE  
MAYOR, ALDERMEN AND BURGESSES  
OF THE  
COUNTY BOROUGH OF HASTINGS.

GENTLEMEN,

I have the honour to lay before you my 26th Annual Report on the Health and Sanitary Condition of this County Borough.

The estimate of population, owing to circumstances connected with the war, has been considerably reduced, namely, from 59,620 in 1914 to 52,053 in 1915. One result of this reduction has been seen in an increased death-rate, and—in a lesser degree—in a rise in the birth-rate.

Deaths were more numerous than they had been for several years, in consequence of the heavy mortality recorded in the first quarter of the year as the result of the prevalence at that time of acute pulmonary diseases which carried off many of our aged inhabitants. Thus the death-rate increased in 1915 to 17·3 per thousand of estimated population as compared with 13·8 in the preceding year.

Corrected for age and sex (on the basis of the 1911 Census) the death-rate was 14·5 against 15·1 in the country as a whole.

The proportion of deaths at ages over 65 years, which in recent years has been always a large one, was again exceedingly high, being over 51 per cent. of all deaths registered.

Deaths of infants under one year of age were more in number than they had been in the three preceding years and the rate of infantile mortality rose to 97 per thousand of births, which figure is, however, considerably below that of the whole country. There was only one infantile death from diarrhœa.

The Zymotic death-rate from the seven chief epidemic diseases was 0·86 per thousand of population, that from measles alone being 0·54. This disease has since become notifiable and may possibly be less difficult of control in the future. The number of births registered showed a further decline ; but, from the reduced estimate of population, the birth-rate 15·5 was 1·3 above that of 1914. Of the 809 nett births in Hastings 87, or 10·7 per cent. were illegitimate, compared with 5·8 per cent. in 1914.

Connected with the presence in the town of the Military element the work of the Health Department was somewhat varied from its usual course, and a considerable amount of the Inspectors' time was taken up with the inspection of billets and the food supplied to the soldiers. These Officials and the Senior Clerk in the Department also assisted in the making of the National Register.

The occurrence of several cases of cerebro-spinal fever, the infection of which was brought into the town probably by soldiers, caused me much anxiety in the early part as did also a prevalence of diphtheria towards the end of the year ; but both these events are now happily of the past.

The work of the Inspectors has been efficiently performed ; and I am grateful to Miss Dowsett for her assistance in connection with the visitation of infants notified under the Act.

I must also tender my thanks to the Chairman, Vice-Chairman, and Members of the Public Health Committee, as well as to the Mayor and Members of your Council for the support and assistance which you have always readily extended to the Officials of the Department under my control, and to myself personally.

I trust that our responsible duties have been carried out to your satisfaction.

I am, Gentlemen,

Yours faithfully,

A. SCARLYN WILSON, D.P.H.,

*Medical Officer of Health.*

Town Hall,  
Hastings.



## PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.

The County Borough of Hastings lies on the southern slope of a range of hills, the highest point of which attains an elevation of nearly 600 feet. The crest or ridge of this hilly range forms the northern boundary of the borough, and is distant from  $1\frac{1}{4}$  to  $2\frac{1}{2}$  miles from the shore, which is the southern boundary. Towards the east also are hills protecting the town on this quarter. Minor hills, with intervening valleys running mainly N. and S., intersect the area of the borough, which has an acreage of 4,857 acres.

The geological formation consists of sandstone, sand, and ferruginous clay. Chalk is not found in the neighbourhood.

### BILLETING OF TROOPS IN THE DISTRICT.

Early in December 1914, at a few hours notice, billets had to be found for a whole brigade of soldiers. It was inevitable in the circumstances that a certain amount of overcrowding should at first ensue; but in the course of time a great deal was done to remedy this evil; while in other cases soldiers were removed from houses which were found to be unsuitable into more satisfactory quarters.

Unfortunately, when they came into the Borough, a large number of the men were suffering from sore-throat and acute catarrhal affections of the air passages, and the advent of the soldiers was followed by an outbreak of such complaints amongst the civil population in whose houses they were quartered. The effect of this prevalence of illness on the elderly and the very young was very serious, and in the early months of the past year the mortality amongst them was exceptionally heavy, owing chiefly to the number of fatal cases of influenza, pneumonia and bronchitis which were registered during this period of the year. Later in the year, after the departure of the Welsh Brigade, other troops, which replaced them, were billeted at first on the inhabitants of houses situated conveniently for military purposes and afterwards to some extent in empty residences. The presence of the troops added greatly to the work of the officials of the Health Department, especially in regard to housing, infectious disease and food inspection.

### POPULATION.

Owing to the changes resulting from the enlistment of a large number of men in the Naval and Military Services, and from the emigration of persons of both sexes from Hastings to centres of industry for war-work of various kinds, it has become necessary to revise the estimate of population of the Borough.

The number of its inhabitants was calculated to be 59,620 in 1914 ; but for the purposes of this report the civil population is presumed to have been reduced to 52,053, which number is that on which the vital statistics contained herein have been based. It must be obvious that the withdrawal of a considerable proportion of healthy persons in the prime of life from the district must influence in a marked degree the rate of births and of deaths, tending to decrease the former and to raise the latter. What its effect in these respects has actually been will be realized from the figures given elsewhere in this Report.

### OCCUPATIONS OF THE INHABITANTS.

The character of the District has not been much changed by the war in so far as the occupations and pursuits of the inhabitants is concerned, but remains that of a seaside health and pleasure resort, largely residential, and with a considerable population chiefly engaged in ministering to the needs of visitors to the town. At the East End of the Borough the chief industry is that of fishing. In the absence of a harbour the boats are of necessity beached on returning from the fishing-grounds.

### SANITARY CIRCUMSTANCES OF THE DISTRICT.

#### WATER SUPPLY.

The water supply of the Borough is undertaken by the Corporation. The water, which is of excellent quality and of only a moderate hardness, is derived from the Ashdown Sands, in which formation deep wells have been sunk both within the area of the Borough and at various points in the surrounding country.



From the different sources of supply the water is pumped to reservoirs situated on the higher levels, whence it flows by gravitation to the areas of distribution.

In the lower parts of the town the supply is constant, but is intermittent at the more elevated localities. Though in many houses water can be drawn direct from the main, water-cisterns are everywhere in use for domestic purposes.

There are very few houses in the Borough which have other than the Public Water Supply, though a few private wells are still in use in the outskirts of the town.

#### SEWERAGE AND HOUSE-DRAINAGE.

The water-carriage system is universal in the District, and the condition of the town as regards house-drainage excellent. A fair amount of private drainage work was carried out during the year, 125 houses being provided with new water-tight drains, and 178 drains cleared, amended, or partially re-laid. No important sewerage work was undertaken in the year.

#### SCAVENGING.

Road-scamenging is performed under the direction of the Borough Surveyor by a staff of Corporation employees, many of whom are elderly. The work is efficiently carried out and is rendered easier by the improved surface of the roads which has followed the general introduction of motor traffic in the place of horse-drawn vehicles. There is in consequence much less fouling of the roads with organic matters, and the surface is to a great extent rendered smooth and impervious by the use of hard-wood blocks and by treatment with some form of tar-spraying.

The roads are watered and the road-gullies cleansed at intervals and well flushed.

The collection of ashes and refuse from ordinary dwelling-houses is made weekly, and at shorter intervals from hotels, hospitals, and other large establishments.

The bulk of this refuse is disposed of at the Destructor, situated at the extreme eastern point of the town. A small amount collected in the neighbourhood of Hollington, which locality is far removed from the Destructor, and some from other distant parts is tipped in isolated spots outside of and within the Borough. This method of disposal is sometimes open to objection.

#### HOUSING ACCOMMODATION.

There is in almost all parts of the town a considerable amount of empty property, much of which is suitable for the housing of working-class tenants.

#### HOUSING AND TOWN PLANNING ACT.

Under this Act a considerable amount of work was done during the year, much of which was in respect of dwellings in which the defects were not so grave as to call for closure.

Some of the houses dealt with had been inspected in 1914. The houses chosen for inspection are such as from their general appearance are considered likely to require closure. Of dwellings newly inspected in the past year, 263 in number, 17 were considered unfit for habitation; 169 showed defects which were remedied without the application of a closing order or the intervention of the Public Health Committee; 25 were closed without formal order, and were subsequently rendered fit for habitation, and 10 dwellings were closed under formal orders.

Sixteen dwellings in respect of which closing and demolition orders had been made were pulled down during the year. All these were situated in the Old Town of Hastings. They were Nos. 1 to 6, inclusive, Meadows Cottages; two cottages in Bourne Walk, two in Wellington Cottages, three in Waterloo Passage, and three in John Street.

Their removal effects great improvement in their respective neighbourhoods.

On the site of the demolished cottages in John Street motor garages have been erected; the sites of the others remain vacant.

The following Table shows briefly the results of the working of the Act during the year.

Houses Demolished	Houses Inspected.	Houses considered unfit for habitation.	Representations made by Medical Officer of Health.	Closing Orders made (informal).	Dwellings in which defects were remedied without Closing Order.	Dwellings repaired, etc., after Closing Order (informal).	Dwellings closed (formal).	Closing Orders Removed. Dwellings Repaired.
16	263	17	7	25	169	25	10	3

#### PUBLIC ELEMENTARY SCHOOLS.

There are within the Borough 22 Schools, 10 of which are provided, and 12 Non-Provided.

There are in these Schools, 51 Departments (one less than in the preceding year) with 239 Teachers and accommodation for 10,368 Scholars.

The average number on the Registers was 7,635 against 7,848 in 1914.

The average attendance was 6,626 compared with 6,965 in 1914.

The following local children are maintained in special Institutions :—

Deaf and Dumb	...	...	...	...	3
Industrial and Truant	...	...	...	...	21
Mentally Defective, Epileptic and Blind	...	...	...	...	nil.

Dr. Turner, the School Medical Officer, having taken up duty at the War Hospital, Croydon, on May 21st, the official Medical Inspections at the Schools were suspended, and other temporary arrangements were made for work at the School Clinics.

At Halton Clinic, Dr. Daunt attended during two hours on two days in every school week, and at the St. Leonards Clinic, Dr. Peck—until he went away on Military Service—and afterwards Dr. Stanley gave their attendance at similar hours. In the performance of these duties and also in the

matter of home-visitation the three School Nurses rendered valuable assistance. In dealing with infectious diseases I took on the work of visiting the schools and advising as to the procedure which should be followed.

#### SCHOOL CLOSURE.

The following departments were closed owing to outbreaks of infectious disease during 1915 :

##### MEASLES.

Departments.	Days Closed.
Boys ... ..	35
Girls ... ..	32
Junior Mixed ...	37
Infants ... ..	217

##### WHOOPING COUGH.

Infants ... ..	10
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##### DIPHTHERIA.

Boys ... ..	10
Girls ... ..	12
Infants ... ..	30

making a total of 27 Departments closed for 383 days.

The following children were excluded from attendance for various reasons :—

(1) Infectious Diseases ... ..	96
(2) Diseases of Skin (including Ringworm)	161
(3) Inflammatory conditions of the Throat and Tonsils ... ..	60
(4) Nervous Conditions, including St. Vitus's Dance, Epilepsy, etc. ... ..	12
(5) Diseases of the Digestive System ...	36
(6) Bronchial Catarrh and Colds, etc. ...	34
(7) Heart Diseases ... ..	3
(8) Injuries ... ..	13

## CLEANSING STATION.

The Cleansing Station adjoining the Disinfecting Apparatus at Rock-a-Nore proved to be of great value last year, and was freely used for the cleansing of soldiers entering the town in a verminous condition.

For these its existence was a great boon as such persons were enabled while enjoying a cleansing bath to have both themselves and their clothing, which was put through the Steam Disinfector simultaneously, freed from the unwelcome parasites.

Other than soldiers and exclusive of the staff (who sometimes become infested with vermin when dealing with dirty cases) 119 verminous persons made use of these baths.

Included in this number were many children from the Public Elementary Schools.

## VITAL STATISTICS.

There was a further considerable decline in the number of births registered in 1915 as compared with the preceding year and with earlier years.

Births of males were 430, of females 372, giving a total of only 802 births as against 842 in 1914.

Amongst the births registered, one was stated to belong to another District and is therefore to be excluded here; but 8 births (of which seven were illegitimate) were transferred by the Registrar General from other places to Hastings. Subject to these corrections the nett births were 809, viz: 436 of males and 373 of females, yielding a birth-rate of 15·5 of estimated population, compared with 14·2 in 1914 (when, however, the estimate of population was much higher).

The births registered in Ore Sub Registration District rose from 128 in 1914 to 140 in 1915, but in the other three localities they showed a decrease of 32 in All Saints, 12 in St. Mary Madgalen, and 8 in Hollington St. John.



## ILLEGITIMATE BIRTHS.

There was a great increase in the number of illegitimate births registered during 1915 as compared with previous years.

Such births, which in 1914 were 49 in number, were 87 last year, and formed 10·7 per cent. of nett births against 5·8 per cent. in 1914, 6·8 per cent. in 1913, 6·5 in 1912, and 6·3 in 1911.

In the fourth quarter of 1915 the proportion of illegitimate amongst all births was no less than 15 per cent.

## DEATHS AND DEATH-RATE.

The gross number of deaths registered here last year was greater than for many years past. This excess is largely attributable to the heavy mortality from influenza, pneumonia and bronchitis, which was recorded amongst elderly persons during the first quarter of the year, and in a lesser degree to a high rate of infantile mortality in the same period. Deaths of males in the Borough totalled 447, of females 514, making 961 altogether, compared with 889 in 1914, and 826 in 1913.

Of all deaths registered in the District no less than 101, or more than 10 per cent., are to be deducted in accordance with the regulations of the Registrar-General. Of the deaths thus eliminated 58 were deaths of persons not belonging to Hastings which occurred in the Public Institutions of the Borough, viz. : 32 in the East Sussex Hospital, 7 in the Eversfield Chest Hospital, 5 in the Buchanan Hospital, 5 in the Fairlight Sanatorium, 3 in the Southern Sanatorium, 2 in the Workhouse, and 1 in each of the following Institutions, viz. : Chelsea Home for Women, Borough Sanatorium, Hertfordshire Home and Alexandra Home for Chronic Invalids.

A further correction has to be made, however, for the deaths of persons belonging to Hastings who died in other places such as Hellingly Asylum, where a good many deaths of persons from this district occurred.



Such deaths are to be included in the number on which the local death-rate is estimated, and accordingly inward transfers have been made to the number of 45.

Subject to these corrections, namely, the addition of 45 deaths and the deduction of 101, the nett deaths for the year were 905, and the death-rate was 17·3 per thousand of estimated population.

This rate was much higher than it had been for some years past which may be attributed to two chief causes.

The first of these was the abnormal mortality of the first quarter, when the nett deaths numbered 328, including 171 of persons aged 65 years and upwards; and the second was the changed constitution of the population in regard to age-distribution. To this I have already referred, and it must be obvious that the absence on various forms of service connected with the war of a considerable proportion of the strongest and most healthy of our young adults leaves a greatly diminished population, included in which are the infants, the aged, and the weaklings, amongst whom the death-rate is likely to be high. In more or less degree this has been the experience of many districts in England and Wales in the past year, the death-rate for the country being 15·1 against 13·9 in 1914.

#### INFANTILE MORTALITY.

The rate of infantile mortality in 1915 showed a decided increase when compared with the returns of the last three years, being 97 per thousand of births compared with 64 in 1914, 83 in 1913, and 68 in 1912. In 1911 it was 104.

Of the 79 deaths of infants under one year of age which were registered in 1915, 43 occurred in the first quarter, in which period 17 infant deaths were attributed to congenital debility or premature birth, 11 to pneumonia, and 6 to whooping cough. During the rest of the year the infantile mortality rate was low.

From diarrhoea there was only one infant death in 1915, which is an exceedingly satisfactory record; it occurred in

the first quarter of the year. As is usually the case the rate of mortality amongst illegitimate infants was higher than amongst those born in wedlock, the rates in the two classes in 1915 being respectively 126 and 94 per thousand of births.

The Notification of Births Act has been in force since June 20th, 1914, but in the past year only about 80 per cent. of registered births were notified. No such discrepancy should exist, and its extent is no doubt partly due to the fact that the responsibility for notifying is shared by the persons in attendance at a birth, along with the father of the child if resident in the house at the time.

Where the Certified Midwives are in charge it appears that births are almost invariably notified, but where Medical Practitioners attend it is the custom for some always to notify personally, while other doctors usually leave this duty to the nurse.

The Act provides that Medical Practitioners and Certified Midwives shall be supplied on demand with stamped addressed postcards for notifying births. The confidential nature of the information conveyed renders this method of notification, especially in the case of illegitimate births, objectionable.

Two other points in connection with the Act may be noticed. The first is this, viz. : that while the Registrars are authorized to inspect the Notification Register kept by the Medical Officer of Health, that official is not empowered to inspect the records of the Registrars.

The second point is that in the case of births (many of which are illegitimate) in Workhouses and other Institutions, where the visits of the Health Visitor might be regarded as intrusive and unnecessary, the Act might well have provided that information should be given as to the address where the infants might be found when they leave the Institution. Such details can of course be settled by arrangement, but it would have saved inconvenience had they been dealt with in the Act.

The procedure on receipt of a birth-notification is firstly to enter the details given in a Register, and to fill in the name and address on a card which is handed to the Health

Visitor. She visits the house in due course, usually about a week or ten days after the birth, and enters on the card certain details as to the health of the infant and its circumstances, cleanliness and general condition of the home, and notes any advice which she may deem it advisable to give. The card she retains as a record of the number and dates of her visits, and of the baby's progress, with other details. Any insanitary conditions which she observes are reported to the Health Department. During the past year the visiting was done by Nurse Dowsett, of the Local District Nursing Association, to whom our thanks are due for the careful and efficient manner in which she performed her duties.

The time she was able to devote to these duties was, as she found, inadequate for their proper performance, and it was wisely decided by the Council to appoint a Health Visitor who could give her whole time to the work.

The former arrangement with the District Nursing Association terminated with the year, and on the 1st of January of the current year Miss Wells, appointed as a whole-time Health Visitor by the County Borough Council, took up the work.

This lady is well qualified by training and experience for the duties allotted to her, and has done for some years much visiting work in a poor London District.

One of her official duties will be to attend the weekly sessions held at the two Institutes for Mothers which have been established by voluntary agency, and at which much useful work is being done in promoting the welfare of poor mothers and their infants.

The work at both places goes on under the same roof as the School Clinics of the Education Committee, but for a while it lapsed during the past year.

This interruption came about in an unfortunate way, one reason being that the daily cheap dinners were discontinued when it was found that the improved financial position of the mothers, owing to the war, rendered them unnecessary.

With their cessation, however, the attendance of the mothers also rapidly declined.

The Institutes have recently been re-opened, and there is now a fair and increasing attendance of mothers ; not indeed of some of those mothers who the most need guidance and instruction, but it is hoped that these, too, may in time be drawn in and learn to take a more intelligent interest in the welfare of their offspring.

Table IV. appended to this report shows the causes of deaths of infants under one year of age, from which it will be seen that 35 of the total of 79 deaths occurred within the first month of life.

The chief causes of death were prematurity and debility, acute disease of the lungs, measles, and whooping cough.

#### DEATHS BY VIOLENCE.

Violent deaths numbered 28 (7 suicides) against 31 (9 suicides) in the preceding year, 19 (5 suicides) in 1913, and 20 (7 suicides) in 1912.

#### INQUESTS.

Inquests were held on the bodies of 54 persons, of whom 9 did not belong to the District. Death was attributed to Natural Causes in 20 cases, to Accident and Misadventure in 24, to Suicide in 8. An open verdict was returned in the remaining 2.

#### UNCERTIFIED DEATH.

Only one death was uncertified, that is, not certified either by Medical Attendant or by Coroner after inquest.

The death in question was that of an old man of 88, in whose case Senile Decay was the presumed cause of death.

#### DEATHS FROM CERTAIN CLASSES OF DISEASE.

##### DEVELOPMENTAL DISEASES.

Amongst developmental diseases, premature birth, congenital debility and malformation, and marasmus, were responsible for 36 deaths of infants under one year of age, against 25 in 1914, and 35 in 1913.

Nearly half the deaths of young children under one year of age are assigned to these causes, and many of them are probably preventable.

Some of these deaths might be averted if more care were taken of the mothers before their confinement, and the question is one which calls for serious consideration.

Senile decay was the only assigned cause of many deaths of persons aged 70 years and upwards.

#### DEATHS FROM DISEASES OF THE RESPIRATORY SYSTEM.

Deaths from pneumonia and bronchitis in the first quarter of the year numbered 75, and in the whole year were 147; 85 of the deaths were at ages over 65 years. The death-rate from these diseases was 2·82, against 2·25 in 1914, and 1·97 in 1913.

#### CANCER AND MALIGNANT DISEASE.

Deaths from Cancer and malignant disease were 111, against 104 in 1914, 118 in 1913, and 120 in 1912; the Cancer death-rate per thousand of estimated population rose to 2·13, having been 1·73 in 1914, 1·96 in 1913, and 1·98 in 1912.

At ages over 65 years 64 Cancer deaths were recorded, representing about 60 per cent. of the total mortality from this cause.

#### DISEASES OF THE CIRCULATORY SYSTEM.

Organic heart disease caused 97 deaths, of which 68 were at ages over 65 years.

#### ALCOHOLISM OR CIRRHOSIS OF THE LIVER.

Deaths from these two causes are classified together because the Cirrhotic liver is commonly the result of chronic alcoholism.

In 1915 there were 7 deaths under this heading against 11 in 1914, and 13 in 1913. These 7 deaths were all at ages over 45 years, 5 being of persons over 65 years.



## INFECTIOUS DISEASES.

## SCARLET FEVER.

The notifications of Scarlet Fever received were 102 in number against 105 in the preceding year. There was no special prevalence of the disease at any period; but the first quarter yielded the greatest number of cases, namely 38, and there were 32 cases in the second quarter. The type of illness was mild and for the fourth year in succession no death from this cause was reported.

A few cases were imported, but the chief factor in the spread of infection was the occurrence of undetected and therefore unisolated cases. With the mild type of fever which has been observed in recent years it is not to be wondered at that a certain number of cases of scarlet fever escape recognition, no medical advice is sought perhaps, and it is only when desquamation is in progress that suspicion is aroused about some trivial ailment which occurred some weeks previously and which may have been scarlatinal in nature.

There was no reason to presume a milk-origin in any of the cases.

Of patients notified 89 or 87 per cent. were removed to the Sanatorium.

## DIPHTHERIA.

Up to the beginning of October notifications of Diphtheria were few in number, being only 22 all told; but then ensued a sudden outbreak of the disease in the central part of the town, which was more intense while it lasted than any of which I have had previous experience.

The early cases in the locality were amongst the children attending various schools, and they seemed to have nothing in common; even the milk supply being derived from many different sources. The solution was found on Monday, October 25th, when five cases in different houses were notified, the patients all being pupils at the St. Mary-in-the-Castle School. On visiting the School I learned that sore-throats and colds had been prevalent for some weeks amongst the Girls and Infants.



I examined a number of those present, and found that three children then in the classrooms were suffering from Diphtheria; and three more, who were absent suffering from sore-throats, but without medical attendance, were found to be affected with the same disease.

In these circumstances my fears of an extensive outbreak in the school and neighbourhood were abundantly justified; and altogether 17 cases of Diphtheria came to light within the week.

I at once closed the Infants and Girls Departments of the School, leaving the Boys Department open as it was so far immune; but a few days later one boy sickened and I then closed that Department also. The effect of this measure was immediately apparent, for in the following week only 2 cases occurred and 3 in the next.

Unfortunately, an outbreak of this kind (where many cases must have escaped recognition altogether) is almost certain to spread from the primary focus of disease to other parts of the district; and indeed a few cases were shortly reported in other localities, both East and West.

That early cases were not diagnosed as Diphtheria was probably due to the fact that the symptoms were so mild that parents neglected to seek Medical advice. Hence, a number of persons, mostly children, in an infectious condition were permitted to mix freely in School and out of School with others. In a certain number of instances the characteristic features of diphtheria were absent or indefinite, the chief symptoms being a form of nasal catarrh.

The cases were, nevertheless, intensely infective, as is shown by the fact that five members of the Sanatorium Staff contracted the disease. In dealing with the outbreak the School Nurses and the Visitor of the Sanitary Aid Association rendered me much valuable assistance. But in spite of all enquiries it was not possible to trace the outbreak to its origin on account of the wide prevalence in the locality of colds and sore-throats which preceded the recognized disease. Probably some of these cases were truly diphtheritic.

The suggestion was put forward, because the colds (as they were called) broke out on the return of the children who had been away for the hop-picking, that the infection was brought in by them, and certainly such a theory is not improbable, though it was not capable of proof.

Of 88 cases notified in the year, 73 or 83 per cent. were removed to the Sanatorium, and 9 proved fatal.

Of the fatal cases 6 occurred in the Sanatorium.

#### MEASLES.

Measles, which was very little heard of in the District in 1914, was prevalent first in one part and then in another throughout the year, and was responsible for 28 deaths of children.

The fatal cases were more numerous than for many years past.

The control of Measles epidemics is a very difficult matter owing to the fact that the disease is exceedingly infectious for two or three days before the rash appears, and until this point is reached the symptoms are commonly regarded as those of an ordinary heavy cold, which they certainly resemble. Meanwhile the patient, un-isolated, may be spreading infection broadcast.

Even in private boarding-schools, where no effort is spared to prevent spread, it is seldom found possible to stamp out the disease until most, if not all, of those who are unprotected by previous attack have contracted it.

Hence general notification is not likely to be of great value in limiting spread, though it may lead to more efficient nursing and treatment, to a diminished fatality and to a proper recognition by the public of the serious character of the disease.

Useful assistance was afforded through the agency of the Sanitary Aid Association.

Measles and German Measles are now made compulsorily notifiable throughout the country.

#### WHOOPIING COUGH.

This disease was accountable for 7 deaths, of which 6 were deaths of infants under one year of age.

Except in the first quarter of 1915, Whooping Cough was not prevalent.

## DIARRHŒA.

Only one infantile death was attributed to diarrhœa, and this occurred in the first quarter of the year. In hot Summers there is usually amongst infants a more or less heavy mortality from this disease, but in the Summer months of 1915 not a single death was registered from this cause.

Handbills concerning the danger to be apprehended from the action and habits of flies were circulated throughout the district in the early Summer, and these may have had some effect ; while the instruction and advice to the mothers given by the Health Visitor under the Notification of Births Act are no doubt extremely valuable. It is believed that the infection of Summer-diarrhœa is spread by flies which convey the organisms from decomposing materials often to be found in and around dirty houses and yards, in stables and manure-heaps, ash-pits and dust-bins, and deposit the germs on unprotected articles of food such as milk and meat.

## ENTERIC OR TYPHOID FEVER.

Only one case of Enteric Fever occurred during the year, the patient being a consumptive lady visitor.

Her infection was probably traceable to the eating of oysters, of which she had twice partaken shortly before the onset of the symptoms.

## CEREBRO-SPINAL FEVER.

Seven cases of cerebro-spinal ("Spotted") fever occurred not including one which was notified as such but was found after removal of the patient to the Sanatorium not to be of the nature supposed.

The first of the seven cases was notified early in January.

The patient, a young soldier, had been under treatment in Hospital for about three weeks and was recovering when the nature of his disease, which had been obscure, was conclusively diagnosed. He got quite well and was never isolated.

The remaining six cases were all fatal, five of the patients dying in the Sanatorium, and one at home. The last mentioned, a boy of 10 years, died after a very short illness and before the Doctor who was summoned had seen him. An inquest was held and the post mortem examination revealed that cerebro-spinal fever was the cause of death.

The patients who died in the Sanatorium were four young adults between 16 and 18 years of age (three civilian and one military) and one man of 57; all of these deaths were registered during the second quarter of the year.

It will be seen then that of seven known cases no less than six or 86 per cent. proved fatal.

In all the cases, except that of the 10 year old boy, it was possible to establish some more or less close association with the soldiers of whom several thousand were then billeted in the town.

It will be remembered that a great many of the soldiers suffered from "influenza" colds, sore-throat and other catarrhal conditions, and that much illness amongst the civil population prevailed soon after the arrival of the troops. There is, I think, no doubt that the infection which led to the cases of cerebro-spinal meningitis was introduced by the soldiers.

The disease in question is peculiar and is produced by a special organism whose usual habitat is the naso-pharynx.

The organism may be present in the throats or naso-pharynx of many persons but it is only in exceptional cases that it invades the membranes of the brain and spinal cord and sets up meningitis.

Thus it is the germ that spreads and not necessarily the disease.

Conditions favouring the spread of infection are especially insufficient ventilation of rooms, overcrowding, fatigue, and catarrh of the nose and throat, just those conditions in fact which prevailed amongst the soldiers in the early months of 1915: yet, as I have already stated only two soldiers in this district developed meningitis. So far as could be ascertained, no direct connection existed between any two of the cases notified, and although a large number of swabbings of the throats of both military and civilian contacts were made the results appear to have been entirely negative.

#### ACUTE POLIOMYELITIS.

One notification of this disease was received during the year, but the case was subsequently reported to be hysterical not organic, and the notification was therefore withdrawn.



## TUBERCULOSIS.

The Scheme for the treatment of Tuberculosis remains, owing to the War, in much the same position as at this time last year. All chance of proceeding with the proposed buildings at the Sanatorium was lost; so that for children and for advanced cases of Consumption no institutional treatment is yet available outside of the Workhouse.

Women and girls, whether insured or un-insured, who are in the early stages of pulmonary tuberculosis are eligible for treatment in the Borough Sanatorium, where 16 beds are apportioned to their use.

For male patients a few beds are reserved at the Eversfield Hospital in the names of the Hastings Corporation and of the local Insurance Committee.

A few patients from the District received treatment during the year at the Royal National Sanatorium, Bournemouth, the Maltings Farm Sanatorium, Nayland, Fairlight Sanatorium, Crooksbury Sanatorium and St. Michael's Home.

Altogether 34 patients, 17 males and 17 females obtained institutional treatment in the year.

Work at the Hastings Tuberculosis Dispensary, established in the Out-patients Department of the East Sussex Hospital in 1913, continued throughout the year at the same hours as before, namely 5.30 p.m. on Wednesdays and on Saturdays at noon.

The expenses of this Dispensary are shared between the East Sussex County Council and the Corporation of Hastings and patients are received from both their districts. Treatment is practically limited to pulmonary cases.

So far as Hastings is concerned 60 persons presented themselves for examination and treatment against 79 in the preceding year.

The decline in numbers is due to the fact that the Hastings Insurance Committee sent but a small number of patients when it was advised by the Commissioners that the same patients could not at the same time receive Dispensary treatment as well as what is termed ancillary treatment, meaning thereby an allowance of extra nourishment.

Amongst the new patients treated at the Dispensary 20 were from East Sussex and 40 from Hastings, and many received much benefit. Various methods of treatment are employed, but the use of tuberculin has been discontinued. Gratuitous treatment at the Dispensary is limited to persons or their dependants whose income does not exceed that of those who are entitled to ordinary Insurance benefit.

I am happy to acknowledge with thanks the assistance readily given from time to time by Dr. Overend, Radiologist to the Hospital. In certain cases of difficulty the X-Rays are of undoubted value in aiding diagnosis. The total number of cases of Pulmonary Tuberculosis notified in the year was only 91 compared with 136 in 1914 and 135 in 1913. Non-pulmonary cases were only 10 against 21 in 1914 and 34 in 1913.

These figures include notifications received in respect of visitors.

Deaths from Pulmonary Tuberculosis were 56 compared with 59 in 1914 and 55 (the lowest number recorded) in 1913.

The following Table shows the phthisis death-rate in this District in each year since 1906 :—

YEAR.	Phthisis Deaths.	Phthisis Death-rate.
1906	80	1·26
1907	93	1·48
1908	80	1·28
1909	76	1·23
1910	63	1·02
1911	67	1·09
1912	65	1·07
1913	55	0·91
1914	59	0·99
1915	56	1·07



For tuberculous patients other than those suffering from consumption of the lungs, the Corporation has not made provision in any residential institution, but a number of such persons, many of whom are children, obtain admission privately to Hospitals and Homes.

In addition to various forms of institutional treatment provided at the expense of the Corporation, the Insurance Committee and through private and charitable agencies, the Health Visistor of the Corporation gives attention to the homes and the habits of consumptives not in receipt of institutional treatment. For the early diagnosis of the disease the Dispensary is available, and for years specimens of sputum have been gratuitously examined and reported upon at the Borough Sanatorium. Rooms or houses vacated by consumptives are disinfected without charge and an endeavour is made to carry this necessary measure into effect in every instance; but in this some difficulty arises owing to the nomadic habits of some of the poorer consumptives who are apt to change their abode with surprising frequency, and occasionally get lost sight of to reappear after an interval in some totally unexpected locality.

This is particularly liable to occur during the summer months when some patients depart into the country for the picking of fruit and hops, receiving much benefit to themselves from the open air life.

In the absence of a Tuberculosis Care Committee there are several agencies at work for bettering the lot of the poor consumptive.

The Board of Guardians, besides providing excellent accommodation in the Infirmary for such patients, are also very generous in their scale of out-relief to the tuberculous. Much valuable work is also done by the Central Aid Council, by whose aid suitable employment has been found for some phthical patients; and other help has been given in many cases.

The Sanitary Aid Association and many parochial charities are active in assisting such persons and those dependant upon them, by gifts of bedding, clothing, fuel and other material comforts.

## ADMINISTRATIVE MEASURES TAKEN FOR THE CONTROL OF INFECTIOUS DISEASES INCLUDE THE FOLLOWING :—

Enquiry is made on receipt of notification as to the probable source of infection and a form filled up, with other details as to the condition of the infected house, existence of nuisances in the neighbourhood, milk supply, laundry, and so forth.

Isolation Accommodation is provided for persons suffering from any of the following diseases, namely, Scarlet Fever, Diphtheria, Enteric Fever and Cerebro-spinal Fever at the Borough Sanatorium, and for Smallpox at the Isolation Hospital at Brede. Facilities for diagnosis are at hand at the Pathological laboratory, at the Sanatorium, where specimens are examined for detection of Diphtheria, Tuberculosis, Enteric Fever, Venereal Diseases, Cerebro-spinal Meningitis, Septic and other diseases, also for Cancer and Malignant Disease.

Visits are paid to Public Elementary Schools where outbreaks of infectious diseases are threatening, scholars examined, and individuals excluded or departments closed as seems advisable.

Notifications of Infectious Diseases are sent from the Health Department to Head Teachers of such Schools. Gratuitous disinfection of rooms or Schools invaded by infectious illness is carried out. Supplies of Diphtheria Antitoxin are stored at 5 of the Police Stations, where the remedy may be obtained at any hour of the day or night. Provision is made for supervision of Milk, Meat and Water Supply ; and for the visitation of Tuberculosis patients and their isolation in certain cases.

### NOTIFICATION OF INFECTIOUS DISEASES.

The following Table shows the number of notifications of infectious diseases received during the four quarters of 1915, and the attack-rate per 1,000 of the population :—

Diseases.	Notifications.					Attack rate per 1,000 of population in 1915.
	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Whole Year.	
Smallpox .....	...	...	...	...	...	Nil.
Scarlet Fever ...	38	32	15	17	102	1·96
Diphtheria .....	17	2	1	68	88	1·69
Erysipelas .....	7	6	2	12	27	0·52
Enteric Fever...	...	...	...	1	1	0·02
Puerperal Fever	...	...	...	3	3	0·06
Cerebro-spinal Meningitis ..	2	4	...	...	6	0·18
Total.....	64	44	18	101	227	4·36

#### DEATHS FROM THE PRINCIPAL EPIDEMIC DISEASES.

The following Table shows the number of deaths in the County Borough from each of the chief epidemic diseases in the past ten years :—

DISEASE.	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915
Smallpox .....	...	...	...	...	...	...	...	...	...	...
Scarlet Fever .....	6	3	3	3	1	3	...	...	...	...
Diphtheria .....	3	4	2	6	4	2	2	2	1	9
Enteric Fever .....	1	...	2	...	1	...	1	...	1	...
Measles .....	7	3	7	1	25	12	...	4	...	28
Whooping Cough ...	2	13	11	3	35	4	...	7	4	7
Diarrhœa & Enteritis under 2 years .....	26	6	6	9	3	39	3	12	7	1
Total .....	45	29	31	22	68	60	6	25	13	45
Zymotic Death-rate	0·71	0·46	0·49	0·36	0·11	0·98	0·09	0·43	0·22	0·86

## BOROUGH SANATORIUM.

### (ISOLATION HOSPITAL.)

The year's work at the Sanatorium was unusually heavy owing to the number and nature of the cases admitted ; while the occurrence of infection amongst members of the Staff employed at the Sanatorium added greatly to the strain.

For the accommodation of patients suffering from the acute infectious fevers, three separate blocks are provided.

The largest is a pavilion-block for the isolation of Scarlet-fever cases ; the next is a small pavilion-block for Diphtheria ; the third is an isolation-block containing four small wards used for observation of doubtful cases, for the accommodation of private paying patients, for Enteric fever, or for cases of double infection.

In the past year it served when so required for the isolation of patients suffering from Cerebro-spinal fever (Spotted fever).

The great majority of persons treated at the Sanatorium are admitted from the Borough itself, but patients are received from some of the neighbouring districts, where no isolation facilities are otherwise provided.

During the year 1915 accommodation was found for 199 fever patients of whom 106 were admitted for scarlet fever, 84 for diphtheria, 8 for cerebro-spinal fever, and 1 for enteric fever.

#### SCARLET FEVER.

Of 106 persons admitted for Scarlet fever it was found that 6 were not suffering from that disease. The great majority of the cases were slight and none were fatal.

#### DIPHTHERIA.

The number of cases sent in as diphtheritic, including 8 in which that diagnosis after further observation proved to be incorrect, was 84.

In the first nine months of the year there were only 20 admissions with 2 deaths ; but from October 1st onwards to the end of the year cases followed one another with rapidity until the number reached 56 with 5 fatalities.

One of the non-diphtheritic cases also (that of a young soldier suffering from acute septic tonsillitis) proved fatal with symptoms of general septicæmia.

Even when not fatal a number of the diphtheria cases in the autumn were of severe type and they were acutely infective, so much so that 5 members of the Staff who were in attendance on the diphtheria patients fell victims to the disease.

Fortunately they all recovered without serious consequences, but the loss of their services at such a time was greatly felt, and it added much to the anxiety of the moment.

#### ENTERIC FEVER.

The patient, a soldier, suspected of having enteric fever, was found to be suffering from pneumonia, and after a short stay he was transferred to the East Sussex Hospital.

#### CEREBRO-SPINAL FEVER.

Of 8 persons admitted for this disease one patient was a soldier from the front, sent home convalescent who was detained for a short time only while all question of his infectiveness was being solved.

A second case, the patient an infant, was not of the nature supposed.

The remaining 6 were genuine cases of this most terrible disease, and 5 of them proved fatal, namely 4 civilians and 1 soldier. The patient who recovered was a soldier sent in from a neighbouring Rural District and he was discharged in very fair health after a stay of 50 days.

#### TUBERCULOSIS.

In the Block devoted to tuberculosis cases (female) eleven patients were resident at the opening of 1915 and 39, including five girls under 13 years of age, were admitted during the year.

Thus 50 female patients were under treatment in this block of whom one died, thirty-nine were discharged, and ten remained as inmates on December 31st.



Of the 39 new patients, 25 were sent by the East Sussex Insurance Committee, 8 by the Borough Insurance Committee, and 6 were un-insured consumptives from the Borough.

Every attention is bestowed on these patients, many of whom enjoy the advantages of a prolonged course of Sanatorium treatment and derive great benefit therefrom; while others, who have a shorter stay, gain improvement in health from the generous diet and open-air life, and learn how to care for their health in the future at home, and to use such precautions against spreading infection as shall render their society innocuous to others.

The following Table shows briefly the results of the year's work in the Wards at the Borough Sanatorium :—

Disease.	Number in Hospital Jan. 1st, 1915.	Admitted during year.	Died.	Discharged	Remaining in Hospital Dec. 31st, 1915.
Scarlatina ...	12	106	—	110	8
Diphtheria ...	23	84	6	77	24
Enteric Fever ...	—	1	—	1	—
Cerebro-spinal Fever ...	—	8	5	3	—
Total of Fever Cases ...	35	199	11	191	32
Tuberculosis ...	11	39	1	39	10
Grand Total ...	46	238	12	230	42

At the Borough Sanatorium a large amount of bacteriological and microscopic work has been carried out by the Medical Attendant in the Pathological Laboratory. The work



of the past year includes the following examinations of specimens submitted :—

Throat-swabs for detection of Diphtheria germs	511
Sputa for Tubercle bacilli	650
Widal tests for enteric fever	12
Urine for Tubercle bacilli and cultures	22
Blood Examinations	17
Examinations for detection of gonococci	18
Examinations of Cerebro-spinal fluid	6
Hair for ringworm	14
Various sections for cancer, etc.	40
Examinations of fæces, vomit, pus, pleuritic fluid	40

The figures include examinations of specimens obtained from patients in the Sanatorium.

#### DISINFECTION.

In addition to the work at the Cleansing Station already referred to, the disinfecting Staff at the Chief Disinfecting Station were busily engaged throughout the year.

Rooms disinfected were	610
Sets of bedding „ „	995
Police Cells „ „	10
Cabs „ „	5

A large number of pillows, bolsters, blankets and carpets were removed from various premises in the Borough for disinfection.

A quantity of horse-rugs, blankets and kit-bags were disinfected for the Military Authorities.

The uniforms of all wounded soldiers admitted to the local hospitals were collected and disinfected; and soiled dressings from these institutions were called for daily and destroyed at the Destructor.

Rooms vacated by tuberculous persons were sprayed, and much bedding and clothing and many other articles removed therefrom were disinfected or destroyed. Rooms thus dealt with numbered 106.

There is a smaller Steam-disinfecting apparatus at the Borough Sanatorium, but its use is ordinarily limited to that establishment.

#### SUPERVISION OF MIDWIVES.

Miss Stone, Superintendent of the District Nursing Association, continues to supervise the work of the registered Midwives, inspects their books, bags, and equipment, and reports quarterly (or at other times as well if necessary) to the Local Midwives Committee.

The number of Midwives on the Register was only 11, most of whom are members of the regular staff of the Nursing Association. Only two are untrained.

Maternal mortality in child-birth is decreasing.

In the three years 1901-3 it was 5·1 per 1000 births ; in 1911-13 it had fallen to 3·3, and in 1915 it was 3·7. The decrease is due to the lesser number of deaths from complications other than puerperal fever. Nevertheless, there have been only 2 deaths from puerperal fever in the past 5 years.

#### SALE OF FOOD AND DRUGS ACT.

With the assistance of agents, the Inspectors of the four Sub-Districts procured during the year samples of various articles of food which were submitted to the Borough Analyst for examination and report.

The samples were as follows :—

Milk	...	60, of which 12 were below standard.
Butter	..	49
Self-raising Flour		5
Baking-powder		1
Cheese	...	6
Lard	...	2
Pepper	...	4
Coffee	...	2
Preserved Cream		11
Cream	...	10, of which 3 were Preserved Creams. not labelled.
Sugar	...	3
Cream of Tartar		1

Whisky	...	5, of which one was below standard.
Smoked Sausages	4	
Pork, etc., Sausages	7	
Margarine	...	17
Rice	...	2
Sago	...	1
Semolina	...	1
Total		<u>191</u>

The great majority of the samples were of dairy produce and it was amongst these that the chief adulterations were found.

The action taken in dealing with these cases is shown in the subjoined Table.

Sample of	Report of Public Analyst.	Result of Proceedings [if any].
Milk ...	Fat 2.9%, Solids not fat 8.4%, Water 88.7%	Vendor asked for an explanation by the Public Health Committee. Cautioned.
Milk ...	Fat 2.9%, Solids not fat 8.5%, Water 88.6%	Ditto.
Milk ...	Fat 3.2%, Solids not fat 7.9%, Water 88.9%	Fined 10/6 and costs 5/-. Total 15/6.
Milk ...	Fat 3.3%, Solids not fat 8.4%, Water 88.3%	All relate to the same case.
Milk ...	Fat 3.1%, Solids not fat 7.9%, Water 89%	
Milk ...	Fat 3.3%, Solids not fat 8.3%, Water 88.4%	
Milk ...	Fat 3.3%, Solids not fat 8.4%, Water 88.3%	
Irish Whisky	Proof Spirit 68.5%, Additional water 31.5%	Fined £5 and costs, 2/6 Witness Fees. Total £5 2s. 6d.
Milk ...	Fat 2.9%, Solids not fat 8.7%, Water 88.4%	Vendor asked for an explanation by the Public Health Committee. Cautioned.
Milk ..	Fat 1.7%, Solids not fat 8.6%, Water 89.9%	Fined £2 10s. including costs.
Milk ...	Fat 2.6%, Solids not fat 8.7%, Water 88.7%	Fined £1 1s. including costs.
Milk ...	Fat 2.7%, Solids not fat 8.4%, Water 88.9%	Ditto
Milk ...	Fat 2.5%, Solids not fat 8.7%, Water 88.8%	Ditto
Cream...	Fat 44.7%. Preserved not labelled.	Fined 10/6 and costs. Total £1 1s.
Cream...	Fat 44.8%. Preserved not labelled.	Ditto
Cream...	Preserved. Not labelled.	Fined 10/6 inclusive

## FOOD POISONING.

About Whitsuntide, a series of cases of ptomaine poisoning came to my notice.

A score of such cases were observed, and they were apparently caused by the consumption of smoked sausages purchased from a shop in the Borough.

On enquiry I learned that the sausages had freshly arrived from a reputable firm in London, and about two lbs. of the consignment were still in the shop.

These were at once surrendered.

Except for a slightly acid odour the sausages showed no indication of being otherwise than wholesome.

I retained one sausage for examination, the rest were destroyed. The premises were clean and well kept, and the proprietor had bought such sausages for years from the same firm.

The invoices showed that the consignment was recently received.

I at once communicated with the Medical Officer of Health of the London District, where the manufacturer carried on his business, and I received a most satisfactory report as to the conditions found there.

But as the sausages were actually made at factories in two other districts in or near London it was necessary to pursue enquiries in those directions as well.

However, investigations in those quarters revealed nothing which could be looked on as accountable for the outbreak.

The matter was in due course reported to the Public Health Committee, but as no negligence had been proved against the local purveyor no proceedings were taken against him.

Fortunately, the patients who suffered ill-effects from eating the sausages all recovered.

## SLAUGHTER HOUSES AND INSPECTION OF MEAT AND FISH.

In the absence of a public abattoir the slaughtering of animals for food is done in private slaughter houses, of which there are 21 in the Borough.

Most of these are scattered about the more rural parts of the district, where they are not accessible to constant supervision, but they are visited at frequent intervals by the District Inspector.

They are kept in a tolerable state of cleanliness and repair. It is an established custom that diseased conditions observed at the time of slaughter shall be reported by the butcher without delay to the Public Health Department, and that any carcase showing signs suggestive of disease shall be retained in the slaughter house until an Inspector has examined it. In this way the butcher is relieved of a great responsibility, and if he does not avail himself of the proffered assistance and diseased meat is found on his premises he has only himself to blame if trouble ensues.

The following tabular statement shows the amount of diseased and unsound meat surrendered to or seized by the Inspectors in the course of the year.

## INSPECTION OF MEAT AND FISH.

WESTERN DISTRICT.					
Beef	...	4 lbs.	...	...	Bruised.
Various Internal Organs.					
NORTHERN DISTRICT.					
Beef	...	8 stones	...	...	Tainted.
"	...	1 Ox Head	...	...	Actinomycosis.
"	...	1 Carcase	...	...	Tuberculous.
"	...	8 stones, also Skirt,	Lungs and Liver. ...		
"	...	Head, Tongue, Skirt			
"	...	and Lungs	...	...	"
"	...	2½ stones	...	...	Bruised.
"	...	Lungs and Livers of	Four Beasts		
"	...				
Veal	...	1 carcase	...	...	Immature.
Mutton	...	1 carcase	...	...	Dropsical.
"	...	2½ lbs.	...	...	Bruised.
"	...	1 Head	...	...	Coenurus
					Cerebralis.



Pork	...	4 carcasses	...	...	Dropsical, etc.
"	...	1 Head	...	...	Tuberculous.
Internal		83 Livers and Lungs			Parasitic.
Organs		1 Kidney	...	...	Nephritis
		28 lbs. Ox Kidneys	...		Decomposed.

## CENTRAL DISTRICT.

Beef	...	4 carcasses	...	...	Tuberculous.
"	...	1 Head and Tongue	...		"
"	...	1 Forequarter	...		"
"	...	118 lbs.	...	...	Unsound
"	...	37 lbs. Suet	...	...	"
Internal		17 Livers	...	...	Parasitic, etc., or Abscess.
Organs.		6 Lungs	...	...	"
		25 Kidneys.	...	...	Inflammation or unsound.
Tripe	...	15 lbs.	...	...	Unsound.
Whelks.	...	1½ Bushels	...	...	"
Preserved		3 Tins Ox Tongue	...		"
Foods, etc.		6 „ Potted Herrings			"
"		1 „ Boiled Beef	...		"
"		2 „ Galantine of Beef			"
"		1 „ Ham and Chicken			"
"		4 lbs Smoked Sausages			"

1 carcase of Beef, with Head, Tongue, Heart and Lungs, was examined and seized, at the time of exposure for sale, on a dealer's van. The whole of the meat was condemned by a Justice of the Peace. Proceedings were taken and the owner fined £20 and costs, 2 other charges being withdrawn.

## EASTERN DISTRICT.

Fish	...	1 Box Magrims	...	Unsound.
"	...	1 „ Shrimps	...	"
"	...	3 „ Mackerel	...	"
"	...	1 „ Whiting	...	"
"	...	1 Barrel Sprats	...	"
"	...	4 Boxes Fillets	...	"
"	...	3 stone Mixed Fish	...	"
"	...	4 Coal Whiting	...	"
"	...	1 Box Mixed Fish	...	"
"	...	3 Boxes Shrimps	...	"

Meat	...	1 Pig's Head (6 lbs.)...	Diseased Glands
"	...	4 Quarters Beef (44 stone 2 lbs.)	" "
"	...	4 " " (56 stone 1½ lbs.)	Tuberculous.
(Seized when exposed for sale. Owner fined £20 and costs).			

A greater amount of time than is usually devoted by the Inspectors to the matter was given to inspection of food in the year 1915, owing to the demands of the Military Authorities for the frequent examination of provisions and meals served out to the soldiers who were stationed in the town. At one time, in consequence of the men's dissatisfaction, their food was inspected as often as thrice in the day; but it did not appear that there was much ground for complaint either as to the quality or quantity of the rations provided. This work occupied for a while a considerable portion of the Inspectors' time. Opportunities were also given to some of the Officers, who would afterwards be responsible for inspection of military food-supplies, to learn at the slaughter houses the appearances of healthy and of diseased meat. I believe that these demonstrations were greatly appreciated.

#### OFFENSIVE TRADES.

The business of gut-scraping is carried on in certain premises in Elphinstone Road, the buildings being on an open site and considerably remote from any dwelling-house. Complaint of offensive odours emanating from these buildings was made by a resident in the neighbourhood, but the Inspector who visits the premises from time to time was unable to detect any ground of complaint. The business appears to be carefully conducted.

The fat-melting house in Winding Street in a crowded locality is unfavourably situated, but the method of work has recently been very greatly improved, and complaints are now seldom received.

## INSPECTORS' SUMMARY FOR THE YEAR, 1915.

Drain tests applied ... ..	920
Houses and premises provided with new water-tight drains, properly intercepted and ventilated ... ..	125
Cesspools emptied and cleansed ... ..	10
Cesspools abolished ... ..	4
Drains cleared and amended ... ..	178
New iron and lead, soil, and ventilating pipes fixed ... ..	132
New closets fixed ... ..	178
Closets amended ... ..	148
New flushing boxes provided, necessary storage cisterns being fixed where necessary ... ..	116
Flushing boxes repaired ... ..	108
Houses and premises provided with a proper supply of water ... ..	10
Glazed stoneware sinks fixed, fitted with proper waste pipes, and trapped where necessary ... ..	100
Yards repaved... ..	181
Sanitary ashbins provided ... ..	115
Accumulations of manure and other refuse removed ... ..	155
Rooms, etc., cleansed and whitewashed ... ..	865
Nuisances abated from animals improperly kept...	30
Cases of infectious diseases removed to Sanatorium	177
Nuisances abated from overcrowding ... ..	19
Manure pits constructed ... ..	1
Miscellaneous repairs ... ..	270
Cowsheds, visits to ... ..	96
Slaughter-houses, visits to ... ..	732
New W.C.'s erected ... ..	19
New urinals constructed ... ..	2
Wells closed for domestic use ... ..	3
Samples of Water (Private Wells) ... ..	2

## FACTORIES, WORKSHOPS, AND WORK PLACES.

Over 1,100 visits of inspection were made by the Inspectors in their several districts during the year, and 133 nuisances were discovered and abated. No prosecutions were required.

Of the underground bake-houses, two became vacant during the year, and the number of these premises is now reduced to 39.

Many inspections were made of the kitchens of hotels and restaurants.

## I.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (Including Factory Laundries) ... ..	32	2	Nil.
Workshops (Including Workshop Laundries) ... ..	247	5	
Workplaces (Other than Outworkers' Premises included in Part 3 of this Report) ...	828	17	
Total ... ..	1107	24	Nil.

## 2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts :—*</i>				
Want of cleanness ... ..	54	54		
Want of Ventilation ... ..	1	1		
Overcrowding ... ..	—	—		
Want of drainage of floors ... ..	3	3		
Other Nuisances ... ..	68	68		
Sanitary accommodation { insufficient ... ..	—	—		
{ unsuitable or defective ... ..	6	6		
{ not separate for sexes ... ..	1	1		
<i>Offences under the Factory and Workshop Act :—</i>				
Illegal occupation of underground bakehouse (S. 101) ... ..				
Breach of special sanitary requirements for bakehouse (SS. 97 to 100) ... ..				
Other offences— (Excluding offences relating to outwork which are included in Part 3 of this Report)				
TOTAL ... ..	133	133		

\* Including those specified in Sections 2, 3, 7, and 8 of the Factory and Workshops Act as remediable under the Public Health Acts.





Class.	Number.
4.—REGISTERED WORKSHOPS.	
Workshops on the register (S. 131) at the end of year.	
<div data-bbox="162 414 263 696" data-label="Text"> <p>Important classes of workshops, such as workshop bakehouses, may be enumerated here.</p> </div> <div data-bbox="296 689 714 725" data-label="Text"> <p>Total number of workshops on Register...</p> </div>	<div data-bbox="770 538 807 560" data-label="Text"> <p>321</p> </div> <div data-bbox="770 696 807 719" data-label="Text"> <p>321</p> </div>
5.—OTHER MATTERS.	
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Acts (S. 133, 1901) ... ..	—
<div data-bbox="188 936 527 1077" data-label="Text"> <p>Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Acts (S. 5, 1901) .. ...</p> </div> <div data-bbox="527 936 714 1113" data-label="Text"> <p>Notified by H.M. Inspector ... Reports (of action taken) sent to H.M. Inspector ...</p> </div>	<div data-bbox="792 961 807 984" data-label="Text"> <p>1</p> </div> <div data-bbox="792 1095 807 1118" data-label="Text"> <p>4</p> </div>
Other ... ..	6
Underground Bakehouses (S. 101) in use at end of the year ... ..	39

TABLE I.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1915 AND PREVIOUS YEARS.

Year.	Population estimated to Middle of each Year.	Births.			Total deaths Registered in the District.		Transferable Deaths.		Net Deaths belonging to the District.			
		Un-corrected Number.	Net.		Number	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 year of Age.		At all Ages.	
			Number	Rate.					Number.	Rate per 1,000 Net Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1910	61463	925	925	15.0	878	14.2	30	—	82	89	848	13.8
1911	61040	955	956	15.7	911	14.9	88	29	104	109	852	13.9
1912	60565	911	916	15.1	867	14.3	108	29	63	68	788	13.0
1913	60095	865	870	14.5	826	13.7	74	37	72	83	789	13.1
1914	59620	842	844	14.2	889	14.9	88	22	54	64	823	13.8
1915	52053	802	809	15.5	961	18.4	101	45	79	97	905	17.3

TABLE II.  
CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1915.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.							TOTAL CASES NOTIFIED IN EACH LOCALITY. (e.g., Parish or Ward) of the District.				Total cases removed to Hospital.
	At all Ages.	At Ages—Years.						1 St. Mary Magdalen District.	2 All Saints District.	3 Ore (Urban) District.	4 Hollington St. John Parish.	
		Under 1.	1 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.					
Small-pox ...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera, Plague ...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous croup)	88	...	20	55	8	4	1	11	76	1	...	73
Erysipelas ...	27	...	...	2	2	8	11	15	10	1	1	...
Scarlet fever ...	102	...	7	80	13	2	...	30	63	9	...	89
Typhus fever ...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric fever ...	1	...	...	...	...	1	...	...	1	...	...	...
Relapsing fever	...	...	...	...	...	...	...	...	...	...	...	...
Continued fever	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal fever ...	3	...	...	...	2	1	...	1	2	...	...	...
Cerebro-spinal Meningitis	4	...	...	...	3	...	1	1	2	1	...	4
Polio-myelitis ...	...	...	...	...	...	...	...	...	...	...	...	...
Ophthalmia Neonatorum	14	14	...	...	...	...	...	3	5	5	1	...
Pulmonary Tuberculosis...	91	...	...	14	15	43	16	26	53	9	3	34
Other forms of Tuberculosis...	10	...	3	3	3	1	...	5	3	2	...	...
Totals ...	340	14	30	154	46	60	29	92	215	28	5	200

TABLE III.  
CAUSES OF, AND AGES AT, DEATH DURING YEAR 1915.

CAUSES OF DEATH.		Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District.									Total deaths whether of "Residents" or "Non-Residents" in Institutions in the District.
		All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.	
All Causes	{ Certified ... Uncertified ...	904 1	79 ...	32 ...	27 ...	26 ...	26 ...	68 ...	181 ...	465 1	211 ...
Enteric Fever	...	...	...	...	...	...	...	...	...	...	...
Small-pox	...	...	...	...	...	...	...	...	...	...	...
Measles	...	28	5	11	9	3	...	...	...	...	2
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	7	6	1	...	...	...	...	...	...	...
Diphtheria and Croup	...	9	...	...	3	5	1	...	...	...	7
Influenza	...	40	1	1	2	...	1	1	3	31	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...
Phthisis (Pulmonary Tuberculosis)	...	56	1	...	...	...	9	27	15	4	25
Tuberculous Meningitis	...	6	...	1	3	2	...	...	...	...	8
Other Tuberculous Diseases	...	8	1	...	...	3	1	1	...	1	5
Cancer, malignant disease	...	111	...	...	1	...	...	5	41	64	23
Rheumatic Fever	...	4	...	...	...	2	2	...	...	...	2
Meningitis	...	7	1	1	1	1	...	...	1	...	5
Organic Heart Disease	...	97	...	...	...	1	1	5	22	68	7
Bronchitis	...	56	4	...	1	...	...	1	4	46	1
Pneumonia (all forms)	...	91	13	15	4	3	1	6	10	39	23
Other diseases of Respiratory Organs	...	18	...	...	1	...	...	2	4	11	8
Diarrhoea and Enteritis	...	3	1	...	...	...	...	...	2	...	...
Appendicitis and Typhlitis	...	3	...	...	...	...	...	...	3	...	3
Cirrhosis of Liver	...	6	...	...	...	...	...	...	1	5	...
Alcoholism	...	1	...	...	...	...	...	...	1	...	...
Nephritis and Bright's Disease	...	39	...	...	...	1	1	4	22	11	9
Puerperal Fever	...	1	...	...	...	...	1	...	...	...	...
Other accidents and diseases of Pregnancy and Parturition	...	2	...	...	...	...	...	1	1	...	...
Congenital Debility and Malformation, including Premature Birth	...	36	36	...	...	...	...	...	...	...	5
Violent Deaths, excluding Suicide	...	21	2	...	...	2	1	3	5	8	14
Suicide	...	7	...	...	...	...	1	...	3	3	1
Other Defined Diseases	...	238	3	2	2	3	4	11	42	171	59
Diseases ill-defined or unknown	...	11	5	...	...	...	...	1	1	4	4
Totals	...	905	79	32	27	26	26	68	181	466	211
Sub-Entries. included in above figures.	14. (a) Cerebro-spinal Meningitis 28. (a) Poliomyelitis Pneumonia	4 — 41	— — 5	— — 6	— — 2	1 — 1	2 — 1	— — 6	1 — 7	— — 13	5 — 5

TABLE IV.

## INFANT MORTALITY.

1915. Nett Deaths from stated causes at various Ages under 1 Year of Age.

CAUSES OF DEATH.		Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total deaths under 1 year.
All causes	Certified	30	2	1	2	35	8	10	11	15	79
	Uncertified	...	...	...	...	...	...	...	...	...	Nil.
Small-pox		...	...	...	...	...	...	...	...	...	...
Chicken-Pox		...	...	...	...	...	...	...	...	...	...
Measles		...	...	...	...	...	...	1	2	2	5
Scarlet-fever		...	...	...	...	...	...	...	...	...	...
Whooping-cough		...	...	...	...	...	...	3	...	3	6
Diphtheria and Croup		...	...	...	...	...	...	...	...	...	...
Erysipelas		...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis		...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis		...	...	...	...	...	...	...	...	1	1
Other Tuberculous Diseases		...	...	...	...	...	...	...	1	...	1
Meningitis ( <i>not Tuberculous</i> )		...	...	...	...	...	...	...	1	...	1
Convulsions		2	...	...	...	2	1	...	...	...	3
Laryngitis		...	...	...	...	...	...	...	...	...	...
Bronchitis		...	...	...	...	...	...	...	4	1	5
Pneumonia (all forms)		...	...	...	1	1	1	2	2	7	13
Diarrhœa		...	...	...	...	...	1	...	...	...	1
Enteritis		...	...	...	...	...	...	...	...	...	...
Gastritis		...	...	...	...	...	...	...	...	...	...
Syphilis		1	...	...	...	1	...	...	...	...	1
Rickets		...	...	...	...	...	...	...	...	...	...
Suffocation, overlying		2	...	...	...	2	...	...	...	...	2
Injury at Birth		1	...	...	...	1	...	...	...	...	1
Atelectasis		2	...	...	...	2	...	...	...	...	2
Congenital Malformations		...	1	...	...	1	...	1	...	...	2
Premature Births		19	...	...	...	19	3	...	...	...	22
Atrophy, Debility, and Marasmus		2	1	1	1	5	2	3	1	1	12
Other Causes		1	...	...	...	1	...	...	...	...	1
Totals		30	2	1	2	35	8	10	11	15	79

 Nett Births in legitimate 722  
 the year illegitimate 87

 Nett Deaths in legitimate infants 68.  
 the year of illegitimate infants 11.



